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Examiner's Initials*	Cite No. (optional)	Number	Publication Date	Name of Applicant or Patentee
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EXAMINER SIGNATURE: /Angela Martin/ DATE CONSIDERED:

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^{*} Examiner: Initial if reference considered, whether or not in conformance with MPEP 609. Draw line through cite if not in conformance and not considered. Include copy of this form with next communication to applicant.